

County: Greenville

Facility Type: Abortion Clinic

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREENVILLE WOMEN'S CLINIC 1142 GROVE RD GREENVILLE, SC 29605-4692 FAC.#:864-232-1584 CAMPBELL JR, THOMAS W PH#: 864-232-1584 Facility Email: KATHY.ADAMS99@YAHOO.COM	Greenville / Corporation 1142 GROVE RD GREENVILLE, SC 29605-4692 GREENVILLE WOMEN'S CLINIC PA AB-0001 / 07/31/2014	1

Totals For Facility/License Type: Abortion ClinicNumber of Activities/Facilities licensed: 1 Number Licensed Units: 1

Division of Health Licensing

County: Greenville

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREER ACTIVE DAY CENTER 736 S LINE ST EXT GREER, SC 29651-4027 FAC.#:864-848-3003 CHILDS, RHONDA PH#: 864-848-3003 Facility Email: RCHILDS@ACTIVEDAY.COM	Greenville / Corporation 736 S LINE ST EXT GREER, SC 29651-4027 ACTIVE SC TWO INC ADC-0125 / 10/31/2014	40
Number of Participants:		40
HAVEN IN THE VILLAGE AT CHANTICLEER DAY HAVEN 355 BERKMANS LN GREENVILLE, SC 29605-5606 FAC.#:864-467-0031 SMITH, CATRINA L PH#: 864-497-0031 Facility Email: CLSMITH@5SQC.COM	Greenville / Limited Liability Limited Partnership 355 BERKMANS LN GREENVILLE, SC 29605-5606 MORNINGSIDE OF ANDERSON LP ADC-0288 / 11/30/2014	8
Number of Participants:		8
WEST GREENVILLE ACTIVE DAY CENTER 21 MCBETH ST GREENVILLE, SC 29611-3548 FAC.#:864-271-4211 WILES, TRACY PH#: 864-271-4211 Facility Email: JWILES@ACTIVEDAY.COM	Greenville / Corporation 6 NESHAMINY INTERPLEX STE 401 FEASTERVILLE TREVOSE, PA 19053 ACSR INC ADC-0236 / 03/31/2014	75
Number of Participants:		75

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: 3 **Number Licensed Units:** 123

Division of Health Licensing

County: Greenville

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BON SECOURS ST FRANCIS SURGERY CENTER 209 PATEWOOD DR STE 300 GREENVILLE, SC 29615-3592 FAC.#:864-254-5850 BROOKS, KELLI J PH#: 864-254-5850 Facility Email: ABROWN@SYMBION.COM	Greenville / Corporation 209 PATEWOOD DR STE 300 GREENVILLE, SC 29615-3592 ST FRANCIS HOSPITAL INC ASF-0067 / 09/30/2014	2
Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0		
ENDOSCOPY CENTER OF THE UPSTATE 14 HAWTHORNE PARK CT GREENVILLE, SC 29615-3194 FAC.#:864-331-0364 BAILEY, DEBORAH J PH#: 864-331-0364 Facility Email: Not on File	Greenville / Ltd. Liability 20 BURTON HILLS BLVD STE 500 NASHVILLE, TN 37215-6176 GREENVILLE ASC LLC ASF-0086 / 07/31/2014	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
GHS CROSS CREEK SURGERY CENTER 9 DOCTORS DR, CROSS CREEK MEDICAL PLAZA GREENVILLE, SC 29605-4266 FAC.#:864-455-8400 JOHNSON, PAUL PH#: 864-455-8400 Facility Email: NSALLY@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM ASF-0019 / 02/28/2014	4
Operating Rooms: 4 Procedure Rooms: 0 Endoscopy Rooms: 0		
GHS PATEWOOD OUTPATIENT SURGERY CENTER 200 PATEWOOD DR GREENVILLE, SC 29615-3593 FAC.#:864-454-2600 HAINES, BEVERLY PH#: 864-454-2600 Facility Email: Not on File	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM ASF-0040 / 05/31/2014	8
Operating Rooms: 6 Procedure Rooms: 0 Endoscopy Rooms: 2		
GREENVILLE ENDOSCOPY CENTER 317 SAINT FRANCIS DR STE 150 GREENVILLE, SC 29601-3914 FAC.#:864-232-7338 SWOYER, REBECCA K PH#: 864-232-7338 Facility Email: Not on File	Greenville / Corporation PO BOX 8555 GREENVILLE, SC 29604-8555 GREENVILLE ENDOSCOPY CENTER INC ASF-0027 / 02/28/2014	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		
GREENVILLE ENDOSCOPY CENTER AT PATEWOOD 200 PATEWOOD DR STE B 100 GREENVILLE, SC 29615 FAC.#:864-232-7338 SWOYER, REBECCA K PH#: 864-232-7338 Facility Email: RSWOYER@GASTROASSOCIATES.COM	Greenville / Corporation PO BOX 8555 GREENVILLE, SC 29604-8555 GREENVILLE ENDOSCOPY CENTER INC ASF-0108 / 08/31/2014	3
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 3		

Division of Health Licensing

County: Greenville

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREENVILLE SURGERY CENTER 5 MEMORIAL MEDICAL CT GREENVILLE, SC 29605-4449 FAC.#:864-272-3409 STILLS, DENISE PH#: 864-272-3409 Facility Email: DSTILLS@ASCOA.COM	Greenville / Limited Liability Limited Partnership 5 MEMORIAL MEDICAL CT GREENVILLE, SC 29605-4449 GREENVILLE SURGERY CENTER LP ASF-0017 / 06/30/2014	4
Operating Rooms: 4 Procedure Rooms: 0 Endoscopy Rooms: 0		
JERVEY EYE CENTER 1 DOCTORS DR GREENVILLE, SC 29605-4266 FAC.#:864-250-6486 BERRIOS CRNA, RON PH#: 864-250-6486 Facility Email: RBERRIOS@JERVEY.COM	Greenville / Limited Liability 1 DOCTORS DR GREENVILLE, SC 29605-4266 JERVEY EYE CENTER LLC ASF-0038 / 02/28/2014	6
Operating Rooms: 3 Procedure Rooms: 3 Endoscopy Rooms: 0		
UPSTATE SURGERY CENTER 10 ENTERPRISE BLVD STE 109 GREENVILLE, SC 29615-3534 FAC.#:864-458-7141 BROOKS, KELLI J PH#: 864-254-5850 Facility Email: GEOFFREY_HIBBERT@BSHSI.ORG	Greenville / Ltd. Liability 10 ENTERPRISE BLVD STE 109 GREENVILLE, SC 29615-3534 UPSTATE SURGERY CENTER LLC ASF-0050 / 09/30/2014	2
Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0		

Totals For Facility/License Type: Ambulatory SurgeryNumber of Activities/Facilities licensed: 9 Number Licensed Units: 35

Division of Health Licensing

County: Greenville

Facility Type: Birth Center

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BLESSED BIRTHS FAMILY WELLNESS AND BIRTH CENTER 23 MILLS AVE GREENVILLE, SC 29605-4015 FAC.#:864-233-5513 PH#: Facility Email: BABYCATCHER@BLESSEDBIRTHS.COM	Greenville / Corporation 23 MILLS AVE GREENVILLE, SC 29605-4015 BLESSED BIRTHS INC BC-0003 / 08/31/2014	2
CAROLINA WATERBIRTH 915 SOUTH ST STE J SIMPSONVILLE, SC 29681-3210 FAC.#:864-329-0010 GLENN, CYNTHIA J PH#: 864-329-0010 Facility Email: INFO@CAROLINAWATERBIRTH.COM	Greenville / Limited Liability Company (single member) 915 SOUTH ST STE J SIMPSONVILLE, SC 29681-3210 CAROLINA BIRTH CENTER LLC BC-0005 / 10/31/2014	3

Totals For Facility/License Type: Birth Center

Number of Activities/Facilities licensed: 2 Number Licensed Units: 5

Division of Health Licensing

County: Greenville

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
PURPLE HAZE 493 S PLEASANTBURG DR GREENVILLE, SC 29607-2525 FAC.#:864-232-5569 PILGRIM, WENDY L PH#: 864-232-5569 Facility Email: Not on File	Greenville / Sole Proprietorship 493 S PLEASANTBURG DR GREENVILLE, SC 29607-2525 PILGRIM, WENDY L BP-0197 / 10/31/2014	1
TODD'S MODS 1005 N PLEASANTBURG DR GREENVILLE, SC 29607-1628 FAC.#:864-233-1568 HORTON, TODD PH#: 864-233-1568 Facility Email: Not on File	Greenville / Sole Proprietorship 1005 N PLEASANTBURG DR GREENVILLE, SC 29607-1628 HORTON, TODD BP-0176 / 01/31/2014	1
WHATEVER & MORE 108 E STONE AVE GREENVILLE, SC 29609-5622 FAC.#:864-370-8080 GILLIAM, JOSH K PH#: 864-370-8080 Facility Email: KENNYGILLIAM@GMAIL.COM	Greenville / Corporation 108 E STONE AVE GREENVILLE, SC 29609-5622 WHATEVER & MORE INC BP-0177 / 02/28/2014	1
WHATEVER IIII 1178 WOODRUFF RD STE 10 GREENVILLE, SC 29607-4126 FAC.#:864-329-1008 GILLIAM, KENNETH Y PH#: 864-329-1008 Facility Email: KENNYGILLIAM@GMAIL.COM	Greenville / Sole Proprietorship 1178 WOODRUFF RD STE 10 GREENVILLE, SC 29607-4126 GILLIAM, SON C BP-0161 / 01/31/2013 (Renewal Pending)	1

Totals For Facility/License Type: Body PiercingNumber of Activities/Facilities licensed: 4Number Licensed Units: 4

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ARBORETUM AT THE WOODLANDS AT FURMAN 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FAC.#:864-371-3100 PH#: Facility Email: TCANNADAY@THEWOODLANDSATFURMAN.ORG	Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC CRC-1492 / 05/31/2014	64
Alzheimer Care:Yes Max # Resident:16	Alzheimer Unit: Yes Max # Beds: 16	
Certifications:None		
BAYBERRY OF GREER 309 NORTHVIEW DR GREER, SC 29651-1340 FAC.#:864-848-1935 PRITCHETT, NATASHA J PH#: 864-848-1935 Facility Email: GREER@THEBAYBERRYINN.COM	Greenville / Limited Liability Limited Partnership 309 NORTHVIEW DR GREER, SC 29651-1340 EVERGREEN VILLAGES LIMITED PARTNERSHIP CRC-0595 / 07/31/2014	23
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
CARRIAGE HOUSE OF TAYLORS 402 W MAIN ST TAYLORS, SC 29687-2951 FAC.#:864-292-2416 COLEMAN, ALLYE V PH#: Facility Email: CHTAYLORS@BELLSOUTH.NET	Greenville / Corporation 402 W MAIN ST TAYLORS, SC 29687-2951 CARRIAGE HOUSE OF TAYLORS INC CRC-0978 / 02/28/2014	44
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
CASCADES VERDAE ASSISTED LIVING 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FAC.#:864-528-5501 JOHNSON, DENA CHANEZ PH#: 864-528-5501 Facility Email: THECASCADESVERDAE.COM	Greenville / Limited Liability 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 CASCADES NURSING LLC CRC-1490 / 04/30/2014	92
Alzheimer Care:Yes Max # Resident:13	Alzheimer Unit: Yes Max # Beds: 24	
Certifications:None		
EMERITUS AT BELLAIRE PLACE 23 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FAC.#:864-675-0220 MORRISON, KENNETH SCOTT PH#: 864-675-0220 Facility Email: BELLAIREPLACE-ED@EMERITUSCOM	Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERITUS CORPORATION CRC-1335 / 09/30/2014	162
Alzheimer Care:Yes Max # Resident:10	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
EMERITUS AT GREENVILLE ASSISTED LIVING 1306 PELHAM RD OFC GREENVILLE, SC 29615-3661 FAC.#:864-286-6600 SALOMONE, MICHAEL PH#: 864-286-6600 Facility Email: GREENVILLE-ED@EMERITUS.COM	Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERITUS CORPORATION CRC-1140 / 10/31/2014	119
Alzheimer Care:Yes Max # Resident:25	Alzheimer Unit: Yes Max # Beds: 26	
Certifications:None		
EMERITUS AT HAWTHORNE INN AT GREENVILLE 20 HAWTHORNE PARK CT GREENVILLE, SC 29615-3194 FAC.#:864-288-6775 THOMAS, AMY S PH#: 864-591-1116 Facility Email: Not on File	Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERITUS CORPORATION CRC-1396 / 08/31/2014	68
Alzheimer Care:Yes Max # Resident:17	Alzheimer Unit: Yes Max # Beds: 17	
Certifications:None		
GARDENS AT EASTSIDE 275 COMMONWEALTH DR GREENVILLE, SC 29615-4814 FAC.#:864-329-1200 FORD, JANE A PH#: 864-329-1200 Facility Email: JFORD@ARBORCOMPANY.COM	Greenville / Ltd. Liability 275 COMMONWEALTH DR GREENVILLE, SC 29615-4814 EASTSIDE ASSISTED LIVING LLC CRC-1222 / 08/31/2014	83
Alzheimer Care:Yes Max # Resident:14	Alzheimer Unit: Yes Max # Beds: 14	
Certifications:None		
GREENVILLE COMMUNITY RESIDENCE 158 CAVALIER DR GREENVILLE, SC 29607-4262 FAC.#:864-277-9656 WOJACK, DAVID C PH#: 864-277-0584 Facility Email: GREENVILLECRCF@YAHOO.COM	Greenville / Sole Proprietorship LAND, CELIA T CRC-0073 / 03/31/2014	12
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GREENVILLE GLEN 1101 GARLINGTON RD GREENVILLE, SC 29615-5446 FAC.#:864-627-8700 CONNELLY, REATHA L PH#: 864-627-8700 Facility Email: ED@GREENVILLEGLEN.COM	Greenville / Limited Liability 1101 GARLINGTON RD GREENVILLE, SC 29615-5446 GREENVILLE GLEN ASSISTED LIVING LLC CRC-0887 / 04/30/2014	44
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREENVILLE PLACE 2006 PELHAM RD GREENVILLE, SC 29615-4005 FAC.#:864-288-3331 PIZZOLA, KITTY J PH#: 864-288-3331 Facility Email: KPIZZOLA@GREENVILLEPLACE.BIZ	Greenville / Corporation 2006 PELHAM RD GREENVILLE, SC 29615-4005 CSL LEASECO INC CRC-1402 / 11/30/2014	153
Alzheimer Care:Yes Max # Resident:53	Alzheimer Unit: Yes Max # Beds: 53	
Certifications:None		
GREER COMMUNITY RESIDENCE 112 S BEVERLY LN GREER, SC 29651-1738 FAC.#:864-879-8570 MORTON, TAMARA L PH#: 864-879-8570 Facility Email: TMORTON.GCDNSNB@YAHOO.COM	Greenville / State PO BOX 17467 GREENVILLE, SC 29606-8467 GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD CRC-0237 / 09/30/2013 (Renewal Pending)	12
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GREGORY'S COMMUNITY CARE #5 - MALONE HOUSE 2413 FORK SHOALS RD PIEDMONT, SC 29673-8663 FAC.#:864-299-0716 GREGORY, JOYCE C PH#: 864-277-2269 Facility Email: JCGREGORY6@AOL.COM	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0558 / 01/31/2014	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GREGORY'S COMMUNITY CARE #6 - HOWELL HOUSE 2409 FORK SHOALS RD PIEDMONT, SC 29673-8663 FAC.#:864-299-0716 GREGORY, JOYCE C PH#: 864-277-1852 Facility Email: JCGREGORY6@AOL.COM	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0556 / 01/31/2014	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GREGORY'S COMMUNITY CARE #7 - CRAVEN HOUSE 10 FERGUSON RD PIEDMONT, SC 29673-8603 FAC.#:864-299-0716 GREGORY, JOYCE C PH#: 864-277-0996 Facility Email: JCGREGORY6@AOL.COM	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0555 / 01/31/2014	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREGORY'S COMMUNITY CARE #8 - METZ HOUSE 18 FERGUSON RD PIEDMONT, SC 29673-8603 FAC.#:864-299-0716 GREGORY, JOYCE C PH#: 864-277-8506 Facility Email: LGRIKARD@HOTMAIL.COM	Greenville / Sole Proprietorship PO BOX 637 SIMPSONVILLE, SC 29681-0637 JOYCE C GREGORY CRC-0557 / 01/31/2014	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
HAVEN IN THE VILLAGE AT CHANTICLEER 355 BERKMANS LN GREENVILLE, SC 29605-5606 FAC.#:864-467-0031 SMITH, CATRINA L PH#: 864-497-0031 Facility Email: LICENSING@5SQC.COM	Greenville / Limited Liability Limited Partnership MORNINGSIDE OF ANDERSON LP CRC-1244 / 11/30/2014	60
Alzheimer Care:Yes Max # Resident:60	Alzheimer Unit: Yes Max # Beds: 60	
Certifications:None		
HOMEWOOD RESIDENCE AT CLEVELAND PARK 12 BOYCE AVE GREENVILLE, SC 29601-3110 FAC.#:864-250-1188 KRUGER, JESSICA L PH#: 864-223-2281 Facility Email: MQUINNT@BROOKDALELIVING.COM	Greenville / Ltd. Liability 12 BOYCE AVE GREENVILLE, SC 29601-3110 ARC CLEVELAND PARK LLC CRC-1398 / 07/31/2014	115
Alzheimer Care:Yes Max # Resident:17	Alzheimer Unit: Yes Max # Beds: 17	
Certifications:None		
MANNING HOUSE 10 COMPANION CT GREER, SC 29651-1288 FAC.#:864-989-0707 DURRAH, SERINA M PH#: 864-989-0707 Facility Email: SDURRAH@ALCCO.COM	Greenville / Corporation 10 COMPANION CT GREER, SC 29651-1288 CYPRESS AID OPCO LLC CRC-1407 / 07/31/2014	44
Alzheimer Care:No Max # Resident:5	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MCKINNEY HOUSE 307 MILLER RD MAULDIN, SC 29662-2034 FAC.#:864-297-5044 TATE, CRYSTAL PH#: Facility Email: CLN95@SCDMH.ORG	Greenville / State 307 MILLER RD MAULDIN, SC 29662-2034 PIEDMONT CENTER FOR MENTAL HEALTH SERVICES CRC-0778 / 07/31/2014	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
OAKLEAF VILLAGE AT THORNBLADE 1560 THORNBLADE BLVD GREER, SC 29650-4520 FAC.#:864-968-1277 WOOLLEY, KATHRYN D PH#: 864-968-1277 Facility Email: KWOOLLEY@ROYALGREENVILLE.COM	Greenville / Ltd. Liability 1560 THORNBLADE BLVD GREER, SC 29650-4520 RSC GREENVILLE LLC CRC-1330 / 04/30/2014	100
Alzheimer Care:Yes Max # Resident:19	Alzheimer Unit: Yes Max # Beds: 24	
Certifications:None		
PALMETTOS OF MAULDIN 810 E BUTLER RD GREENVILLE, SC 29607-5842 FAC.#:864-627-0803 DAVIS, KATHRYN H PH#: 864-675-6421 Facility Email: KDAVIS@THEPALMETTOSMAULDIN.COM	Greenville / Ltd. Liability PO BOX 749 MAULDIN, SC 29662-0749 NHC HEALTHCARE/MAULDIN LLC CRC-1503 / 03/31/2014	60
Alzheimer Care:Yes Max # Resident:13	Alzheimer Unit: Yes Max # Beds: 18	
Certifications:None		
PENDLETON MANOR 414 SUMMIT DR GREENVILLE, SC 29609-4821 FAC.#:864-271-7562 WALKER, DAVID A PH#: 864-271-7562 Facility Email: DWALKER@SCHONBERGERANDASSOC.COM	Greenville / Ltd. Liability 414 SUMMIT DR GREENVILLE, SC 29609-4821 GREENVILLE RETIREMENT PROPERTIES LLC CRC-1455 / 08/31/2014	65
Alzheimer Care:Yes Max # Resident:24	Alzheimer Unit: Yes Max # Beds: 30	
Certifications:None		
QUILLEN MANOR 709 QUILLEN AVE FOUNTAIN INN, SC 29644-9444 FAC.#:864-862-3252 FINLEY, FRANCES CAROLYN PH#: 864-476-9100 Facility Email: CAROLYN.QUILLEN@HOTMAIL.COM	Greenville / Limited Liability PO BOX 388 GREER, SC 29652-0388 QUILLEN MANOR LLC CRC-1321 / 12/31/2013	78
Alzheimer Care:Yes Max # Resident:12	Alzheimer Unit: Yes Max # Beds: 12	
Certifications:None		
RIDGEVIEW COMMUNITY CARE HOMES UNIT A 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8559 DAUGHERTY, PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0559 / 01/31/2014	11
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Division of Health Licensing

County: Greenville

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Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
RIDGEVIEW COMMUNITY CARE HOMES UNIT B 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0560 / 01/31/2014	10
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
RIDGEVIEW COMMUNITY CARE HOMES UNIT C 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0561 / 01/31/2014	11
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
RIDGEVIEW COMMUNITY CARE HOMES UNIT D 217 CHANDLER RD GREER, SC 29651-1290 FAC.#:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599 Facility Email: RIDGEVIEW1@MSN.COM	Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290 RIDGEVIEW COMMUNITY CARE HOMES INC CRC-0562 / 01/31/2014	11
Alzheimer Care: No Max # Resident: 0	Alzheimer Unit: No Max # Beds: 0	
Certifications: None		
ROLLING GREEN VILLAGE ASSISTED LIVING FACILITY 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 FAC.#:864-987-9800 HICKMAN, HOPE C PH#: 864-987-9800 Facility Email: ERICD@ROLLINGGREENVILLAGE.COM	Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 ROLLING GREEN VILLAGE CRC-0573 / 03/31/2014	52
Alzheimer Care: Yes Max # Resident: 22	Alzheimer Unit: Yes Max # Beds: 22	
Certifications: None		
SHEPHERD'S CARE CENTER 2100 N PLEASANTBURG DR GREENVILLE, SC 29609-3156 FAC.#:864-322-6212 THOMPSON, ERIC M PH#: 864-322-6212 Facility Email: ETHOMPSD@SHEPHARDSCARECENSTER.COM	Greenville / Ltd. Liability 2100 N PLEASANTBURG DR GREENVILLE, SC 29609-3156 SHEPHERD'S CARE CENTER LLC CRC-1326 / 10/31/2014	90
Alzheimer Care: Yes Max # Resident: 10	Alzheimer Unit: Yes Max # Beds: 19	
Certifications: None		

Division of Health Licensing

County: Greenville

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SHERMAN RESIDENTIAL CARE 20 MAYFIELD ST GREENVILLE, SC 29601-1815 FAC.#:864-242-0401 SHERMAN, OLISE S PH#: 864-242-0401 Facility Email: Not on File	Greenville / Partnership 20 MAYFIELD ST GREENVILLE, SC 29601-1815 JESSE B SHERMAN SR AND OLISE SHERMAN CRC-1070 / 03/31/2014	16
Alzheimer Care:Yes Max # Resident:1	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SOUTHERN OAKS PERSONAL CARE HOME 120 ROPER MOUNTAIN RD EXT GREENVILLE, SC 29615-4823 FAC.#:864-288-3271 BOUDREAU, GAIL R PH#: 864-288-3271 Facility Email: SO.OAKS@HOTMAIL.COM	Greenville / Corporation 120 ROPER MOUNTAIN RD EXT GREENVILLE, SC 29615-4823 EASTSIDE MANOR INC CRC-0611 / 12/31/2013	64
Alzheimer Care:Yes Max # Resident:26	Alzheimer Unit: Yes Max # Beds: 26	
Certifications:None		
SPRINGS AT SIMPSONVILLE 214 E CURTIS ST SIMPSONVILLE, SC 29681-2622 FAC.#:864-962-8570 DEWITT, JAMES A PH#: 864-962-8570 Facility Email: JIMD@CARAVITA.COM	Greenville / Ltd. Liability 214 E CURTIS ST SIMPSONVILLE, SC 29681-2622 CURTIS GROUP LLC CRC-1198 / 05/31/2014	89
Alzheimer Care:Yes Max # Resident:16	Alzheimer Unit: Yes Max # Beds: 16	
Certifications:None		
STERLING HOUSE OF GREENVILLE 2010 BRUSHY CREEK RD GREER, SC 29650-2614 FAC.#:864-244-9994 CARRION, MARY M PH#: 864-886-0070 Facility Email: SHGREENVILLESC@BROOKDALELIVING.COM	Greenville / Corporation 2010 BRUSHY CREEK RD GREER, SC 29650-2614 BROOKDALE SENIOR LIVING COMMUNITIES INC CRC-1306 / 12/31/2013	52
Alzheimer Care:Yes Max # Resident:52	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
WINDSOR HOUSE GREENVILLE 1931 PELHAM RD GREENVILLE, SC 29615-4002 FAC.#:864-288-9450 POLLARD JR, JOE W PH#: 864-288-9450 Facility Email: JPOLLARD212@AOL.COM	Greenville / Ltd. Liability 1931 PELHAM RD GREENVILLE, SC 29615-4002 WHG ASSISTED LIVING LLC CRC-1388 / 07/31/2014	50
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

Totals For Facility/License Type: Community Residential Care FacilityNumber of Activities/Facilities licensed: 35 Number Licensed Units: 1,904

County: Greenville

Facility Type: Freestanding or Mobile Tech.

Facility Name	County/Ownership Type	Licensed Units
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
GHS THE CAROLINAS CLINICAL PET INSTITUTE	Greenville / District	1
200 ANDREWS ST STE 100	200 ANDREWS ST STE 100	
GREENVILLE, SC 29601-3974 FAC.#:864-527-8500	GREENVILLE, SC 29601-3974	
JOHNSON, PAUL PH#: 864-527-8500	GREENVILLE HEALTH SYSTEM	
Facility Email: Not on File	FSMT-0017 / 02/28/2014	

Totals For Facility/License Type: Freestanding or Mobile Tech.Number of Activities/Facilities licensed: 1 Number Licensed Units: 1

Division of Health Licensing

County: Greenville

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CIVITAN COMMUNITY RESIDENCE 1820 RIDGE RD GREENVILLE, SC 29607-4704 FAC.#:864-679-0220 LOMAX, NICOLE PH#: 864-679-0220 Facility Email: DGOODELL@GCDSNB.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0113 / 12/31/2013	8
FOUNTAIN INN COMMUNITY RESIDENCE 105 OLD FAIRVIEW RD FOUNTAIN INN, SC 29644-1822 FAC.#:864-679-0220 IREY, KIM PH#: 864-679-0220 Facility Email: BPARKER@GCDSNB.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0197 / 06/30/2014	12
HUGHES STREET COMMUNITY RESIDENCE 104 HUGHES ST FOUNTAIN INN, SC 29644-2110 FAC.#:864-679-0220 IREY, KIM PH#: 864-679-0220 Facility Email: BPARKER@GCDSNB.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0201 / 06/30/2014	8
MARIAN PARKINS COMMUNITY RESIDENCE I 103 KERNS AVE GREENVILLE, SC 29609 FAC.#:864-679-0220 BRYANT, LIZA PH#: Facility Email: JCOCOLONE@GCDSNB.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0150 / 05/31/2014	8
MARIAN PARKINS COMMUNITY RESIDENCE II 518 PICKETT ST GREENVILLE, SC 29609 FAC.#:864-679-0220 BRYANT, LIZA PH#: Facility Email: JCOCOLONE@GCDSNB.ORG	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0149 / 05/31/2014	8
RIDGE ROAD RESIDENCE 1810 RIDGE RD GREENVILLE, SC 29607-4704 FAC.#:864-679-0220 LOMAX, NICOLE PH#: 864-679-0220 Facility Email: DGOODELL@DDSN.SC.GOV	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0176 / 09/30/2014	12
TRAVELERS REST COMMUNITY RESIDENCE 252 LITTLE TEXAS RD TRAVELERS REST, SC 29690 FAC.#:864-679-0220 CRUELL, KIMBERLY PH#: 864-679-0220 Facility Email: DGOODELL@DDSN.SC.GOV	Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0222 / 06/30/2014	8

County: Greenville

Facility Type: Habilitation R15

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: Habilitation R15Number of Activities/Facilities licensed: 7 Number Licensed Units: 64

Division of Health Licensing

County: Greenville

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ALERE WOMEN'S AND CHILDREN'S HEALTH LLC-PIEDMONT 25 WOODS LAKE RD STE 329, GREEN GATE OFFICE PARK GREENVILLE, SC 29607-6169 FAC. #: 864-359-9640 FLOOD, LYNNE PH#: 864-359-9640 Facility Email: FERN.MATTHEWS@ALERE.COM	Greenville / Corporation 3200 WINDY HILL RD SE STE 100B ATLANTA, GA 30339-8504 ALERE HEALTH LLC HHA-0128 / 03/31/2014	33
Counties Served: Abbeville, Allendale, Anderson, Bamberg, Barnwell, Calhoun, Cherokee, Chester, Chesterfield, Clarendon, Darlington, Dillon, Edgefield, Florence, Greenville, Greenwood, Hampton, Horry, Jasper, Laurens, Lee, Marion, Marlboro, McCormick, Oconee, Orangeburg, Pickens, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		
License Restrictions: Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: N Medical Supplies/Appliances/Durable Medical Equipment N Other: IV THERAPY		
GENTIVA HEALTH SERVICES-GREENVILLE 1430 ROPER MOUNTAIN RD STE E GREENVILLE, SC 29615-4243 FAC. #: 864-297-5711 VAUGN, AMY PH#: Facility Email: AMY.VAUGHN@GENTIVA.COM	Greenville / Corporation 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARERESOURCES OF SOUTH CAROLINA LLC HHA-0158 / 01/31/2014	8
Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union		
License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		
GHS HOME HEALTH AGENCY 876 W FARIS RD GREENVILLE, SC 29605-4253 FAC. #: 864-455-8140 WOODS, LANDACE PH#: 864-455-8140 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HHA-0020 / 06/30/2014	2
Counties Served: Greenville, Pickens		
License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment Y Other: (NOT DME)		

Division of Health Licensing

County: Greenville

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
INTERIM HEALTHCARE OF GREENVILLE 16 HYLAND RD GREENVILLE, SC 29615-5756 FAC.#:864-627-1200 SCHROEDER, RAYMOND R PH#: 864-627-1200 Facility Email: CONNIE.MCCAMMOND@INTERIMCARES.COM	Greenville / Corporation 16 HYLAND RD GREENVILLE, SC 29615-5756 INTERIM HEALTHCARE OF GREENVILLE INC HHA-0057 / 06/30/2014	10
Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Spartanburg, Union License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		
ROLLING GREEN VILLAGE HOME HEALTH AGENCY 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FAC.#:864-987-9800 HICKMAN, HOPE C PH#: 864-987-9800 Facility Email: HOPEH@ROLLINGGREENVILLAGE.COM	Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 ROLLING GREEN VILLAGE HHA-0213 / 12/31/2013	1
Counties Served: Greenville License Restrictions: SERVING CONTINUING CARE RETIREMENT COMMUNITY AT ROLLING GREEN VILLAGE RESIDE Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment Y Other:		
ST FRANCIS HOSPITAL HOME CARE 131 COMMONWEALTH DR STE 230 GREENVILLE, SC 29615-4887 FAC.#:865-233-5300 POPE, BENITA PH#: 865-688-1700 Facility Email: ANDREA_HOLTZER@BSHSI.ORG	Greenville / Corporation 131 COMMONWEALTH DR STE 230 GREENVILLE, SC 29615-4887 ST FRANCIS HOSPITAL INC HHA-0167 / 12/31/2013	4
Counties Served: Anderson, Greenville, Pickens, Spartanburg License Restrictions: Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: N Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other: CHAPLAIN SERVICES		

Totals For Facility/License Type: Home HealthNumber of Activities/Facilities licensed: 6 Number Licensed Units: 58

County: Greenville

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MCCALL HOSPICE HOUSE OF GREENVILLE 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 FAC.#:864-688-1700 HOLTZER, ANDREA M PH#: 864-688-1700 Facility Email: ANDREA_HOLTZERE@BSHSI.ORG	Greenville / Corporation 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 ST FRANCIS HOSPITAL INC HPF-0010 / 07/31/2014	30

Totals For Facility/License Type: Hospice FacilityNumber of Activities/Facilities licensed: 1 Number Licensed Units: 30

Division of Health Licensing

County: Greenville

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CARIS HEALTHCARE-GREENVILLE 111 SMITH HINES RD STE D GREENVILLE, SC 29607-5745 FAC.#:864-297-7931 LEE, TERESA PH#: 864-297-7931 Facility Email: Not on File	Greenville / Limited Liability 111 SMITH HINES RD STE D GREENVILLE, SC 29607 CARIS HEALTHCARE LLC HPC-0131 / 12/31/2013	46
Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		
GENTIVA HOSPICE 15 BRENDAN WAY STE 100 GREENVILLE, SC 29615-3562 FAC.#:864-297-3164 MILLER, ANNETTE PH#: 864-297-3164 Facility Email: Not on File	Greenville / Corporation 12900 FOSTER ST STE 400, CORPORATE LICENSURE DEPT OVERLAND PARK, KS 66213-2696 VISTACARE USA LLC HPC-0058 / 08/31/2014	8
Counties Served: Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union		
HEARTLAND HOSPICE SERVICES-GREENVILLE 421 SE MAIN ST STE 100 SIMPSONVILLE, SC 29681-2697 FAC.#:864-963-0045 SMOAK, CYNTHIA PH#: Facility Email: 4613ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 421 SE MAIN ST STE 100 SIMPSONVILLE, SC 29681-2697 HEARTLAND HOSPICE SERVICES LLC HPC-0137 / 12/31/2013	11
Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Newberry, Oconee, Pickens, Spartanburg, Union		
HOMESTEAD HOSPICE OF GREENVILLE 3453 PELHAM RD STE 107 GREENVILLE, SC 29615-7400 FAC.#:864-288-5136 MARCUS, PATRICIA A PH#: 864-288-5136 Facility Email: JEANNE@HOMESTEADHOSPICE.NET	Greenville / Limited Liability 10888 CRABAPPLE RD ROSWELL, GA 30075-5850 HOMESTEAD HOSPICE OF GREENVILLE LLC HPC-0170 / 01/31/2014	15
Counties Served: Abbeville, Anderson, Cherokee, Chester, Fairfield, Greenville, Greenwood, Laurens, McCormick, Newberry, Oconee, Pickens, Spartanburg, Union, York		
MEDI HOME HOSPICE OF GREENVILLE 20 ROPER CORNERS CIR STE B GREENVILLE, SC 29615-4833 FAC.#:864-627-4270 MULLINAX, MICHELLE PH#: 864-627-4270 Facility Email: LFEDYSCHYN@MSA-CORP.COM	Greenville / Corporation 171A MONROE LN LEXINGTON, SC 29072-3904 TRI COUNTY HOSPICE INC HPC-0088 / 06/30/2014	18
Counties Served: Abbeville, Anderson, Cherokee, Chester, Edgefield, Fairfield, Greenville, Greenwood, Lancaster, Laurens, McCormick, Newberry, Oconee, Pickens, Saluda, Spartanburg, Union, York		

Division of Health Licensing

County: Greenville

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
OPEN ARMS HOSPICE 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 FAC.#:864-688-1700 POPE, BENITA PH#: 865-688-1700 Facility Email: BENITA_POPE@BSHSI.ORG	Greenville / Corporation 1836 W GEORGIA RD SIMPSONVILLE, SC 29680-7212 ST FRANCIS HOSPITAL INC HPC-0063 / 12/31/2013	5
Counties Served: Anderson, Greenville, Laurens, Pickens, Spartanburg		
PATHWAY HOSPICE 511 W BUTLER RD STE B GREENVILLE, SC 29607-4833 FAC.#:864-312-6825 TILLEY, JEAN PH#: 803-391-4111 Facility Email: JTILLEY@LAURELBAYE.COM	Greenville / Limited Liability 3409 SALTERBECK ST MOUNT PLEASANT, SC 29466-7117 PATHWAY HOSPICE LLC HPC-0147 / 05/31/2014	46
Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		
SOUTHERNCARE-GREENVILLE/SPARTANBURG 6000 PELHAM RD STE B GREENVILLE, SC 29615-5845 FAC.#:864-351-0740 RANCOURT, DIANE L PH#: 864-351-0740 Facility Email: GREER@SOUTHERNCAREINC.COM	Greenville / Corporation 6000 PELHAM RD STE B GREENVILLE, SC 29615-5845 SOUTHERNCARE INC HPC-0083 / 02/28/2014	11
Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, Oconee, Pickens, Spartanburg, Union, York		

Totals For Facility/License Type: Hospice ProgramNumber of Activities/Facilities licensed: 8 Number Licensed Units: 160

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CAROLINA CENTER FOR BEHAVIORAL HEALTH 2700 E PHILLIPS RD GREER, SC 29650-4815 FAC.#:864-235-2335 WILLINGHAM, JOHN C PH#: 864-235-2335 Facility Email: SARAH.SWARTZ@UHSINC.COM	Greenville / Corporation 2700 E PHILLIPS RD GREER, SC 29650-4815 UHS OF GREENVILLE LLC HTL-0806 / 08/31/2014	112
Licensed Beds: General: 0 Psychiatric: 99 Rehab: 0 Substance Abuse: 13 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:None

GHS GREENVILLE MEMORIAL MEDICAL CENTER 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-7114 JOHNSON, PAUL PH#: 864-455-8400 Facility Email: NSALLY@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0343 / 12/31/2013	845
Licensed Beds: General: 746 Psychiatric: 46 Rehab: 53 Substance Abuse: 0 Other Beds : NICU: 12 Neonatal Special Care: 68		

Certifications:Abortions, Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited

GHS GREER MEMORIAL HOSPITAL 830 S BUNCOMBE RD GREER, SC 29650-2400 FAC.#:864-797-8001 MANSURE, JOHN PH#: 864-848-8130 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200, SUNTRUST BLDG GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0906 / 08/31/2014	82
Licensed Beds: General: 82 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Trauma Center Level III, Perinatal Level I, JCAHO Accredited

GHS HILLCREST MEMORIAL HOSPITAL 729 SE MAIN ST SIMPSONVILLE, SC 29681-3280 FAC.#:864-454-6151 BOUR MD, ERIC PH#: 864-454-6151 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0204 / 09/30/2014	43
Licensed Beds: General: 43 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

GHS NORTH GREENVILLE LONG TERM ACUTE CARE HOSPITAL 807 N MAIN ST TRAVELERS REST, SC 29690-1598 FAC.#:864-455-9224 JOHNSON, PAUL PH#: 864-527-8500 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200, SUNTRUST BLDG GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0853 / 08/31/2014	45
Licensed Beds: General: 45 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GHS PATEWOOD MEMORIAL HOSPITAL 175 PATEWOOD DR GREENVILLE, SC 29615-3570 FAC.#:864-797-1000 HAINES, BEVERLY PH#: 864-454-2600 Facility Email: PSAWICKI@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM HTL-0900 / 06/30/2014	72
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

REGENCY HOSPITAL OF GREENVILLE 1 SAINT FRANCIS DR 4TH FLOOR GREENVILLE, SC 29601-3999 FAC.#:864-255-1411 JAMES, STEPHANIE R PH#: 864-255-1401 Facility Email: SJAMES@REGENCYHOSPITAL.COM	Greenville / Ltd. Liability 4714 GETTYSBURG RD MECHANICSBURG, PA 17055-4325 REGENCY HOSPITAL OF GREENVILLE LLC HTL-0882 / 12/31/2014	32
Licensed Beds: General: 32 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

SHRINERS' HOSPITAL FOR CHILDREN 950 W FARIS RD GREENVILLE, SC 29605-4277 FAC.#:864-255-7942 ROMBERGER, RANDY PH#: Facility Email: Not on File	Greenville / Non-Profit Corporation 950 W FARIS RD GREENVILLE, SC 29605-4277 SHRINERS' HOSPITAL FOR CHILDREN INC HTL-0069 / 02/28/2014	50
Licensed Beds: General: 50 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

SPRINGBROOK BEHAVIORAL HEALTH SYSTEM 1 HAVENWOOD LN TRAVELERS REST, SC 29690-9447 FAC.#:864-834-8013 ROWLEY, MICHAEL PH#: 864-834-8013 Facility Email: LISA.MCJUNKIN@SPRINGBROOKBHS.COM	Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690-1005 CHESTNUT HILL MENTAL HEALTH CENTER INC HTL-0442 / 08/31/2014	28
Licensed Beds: General: 0 Psychiatric: 28 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

ST FRANCIS-DOWNTOWN 1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 FAC.#:864-255-1000 NANTZ, MARK S PH#: 864-255-1000 Facility Email: STFRANCISHEALTH.ORG	Greenville / Corporation 1 SAINT FRANCIS DR GREENVILLE, SC 29601-3999 ST FRANCIS HOSPITAL INC HTL-0794 / 12/31/2014	245
Licensed Beds: General: 226 Psychiatric: 0 Rehab: 19 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Division of Health Licensing

County: Greenville

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ST FRANCIS-EASTSIDE 125 COMMONWEALTH DR GREENVILLE, SC 29615-4812 FAC.#:864-675-4000 NANTZ, MARK S PH#: 864-255-1000 Facility Email: STFRANCISHEALTH.ORG	Greenville / Corporation 125 COMMONWEALTH DR GREENVILLE, SC 29615-4812 ST FRANCIS HOSPITAL INC HTL-0793 / 12/31/2014	93
Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 10		

Certifications: Perinatal Level II, JCAHO Accredited

W J BARGE MEMORIAL HOSPITAL 1700 WADE HAMPTON BLVD GREENVILLE, SC 29614-1000 FAC.#:864-770-1352 HASTIE, LEE PH#: 864-770-1352 Facility Email: HOSPITAL@BJU.EDU	Greenville / Non-Profit Corporation 1700 WADE HAMPTON BLVD GREENVILLE, SC 29614-1000 BOB JONES UNIVERSITY INC HTL-0302 / 03/31/2014	79
Licensed Beds: General: 79 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications: None

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 12 Number Licensed Units: 1,726

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ALPHA HEALTH & REHAB OF GREER 401 CHANDLER RD GREER, SC 29651-1243 FAC.#:864-879-1370 BURTON, EDWARD G PH#: 803-796-8700 Facility Email: EBURTON@COVENANTDOVE.COM	Greenville / Limited Liability 401 CHANDLER RD GREER, SC 29651-1243 ALPHA HEALTH & REHAB OF GREER LLC NCF-0908 / 12/31/2013	132

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

ARBORETUM AT THE WOODLANDS 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FAC.#:864-371-3100 CANNADAY, TROY L PH#: 864-371-3100 Facility Email: TCANNADAY@THEWOODLANDSATFURMAN.ORG	Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC NCF-0957 / 06/30/2014	30
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Licensed Beds: Nursing Home: 30 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

DAYSRING HEALTH & REHAB OF SIMPSONVILLE 721 W CURTIS ST SIMPSONVILLE, SC 29681-2526 FAC.#:864-967-7191 KENNEDY, SHERRY SUE PH#: 864-967-7191 Facility Email: LSORCUTT@COVENANTDOVE.COM	Greenville / Limited Liability 721 W CURTIS ST SIMPSONVILLE, SC 29681-2526 DAYSRING HEALTH & REHAB OF SIMPSONVILLE LLC NCF-0900 / 12/31/2013	42
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Licensed Beds: Nursing Home: 42 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

DIAMOND HEALTH & REHAB OF SIMPSONVILLE 807 SE MAIN ST SIMPSONVILLE, SC 29681-7150 FAC.#:864-963-6069 CAJKA, AMY PH#: 864-963-6069 Facility Email: ACAJKA@COVENANTDOVE.COM	Greenville / 807 SE MAIN ST SIMPSONVILLE, SC 29681-7150 DIAMOND HEALTH & REHAB OF SIMPSONVILLE LLC NCF-0905 / 12/31/2013	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Division of Health Licensing

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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EMERITUS AT GREENVILLE 1306 PELHAM RD GREENVILLE, SC 29615-3600 FAC.#:864-286-6600 SALOMONE, MICHAEL PH#: 864-286-6600 Facility Email: EMERITUSGREENVILLE-ED@EMERITUS.COM	Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERICARE INC NCF-0785 / 10/31/2014	45
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Licensed Beds: Nursing Home: 45 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

FOUNTAIN INN NURSING HOME 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 FAC.#:864-862-2554 BAUGHMAN, KATHY J PH#: 864-862-2554 Facility Email: KBAUGHMAN@COOKE-ASSOCIATES.COM	Greenville / Limited Liability 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 COOKE ASSOCIATES OF FOUNTAIN INN LLC NCF-0939 / 03/31/2014	60
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Licensed Beds: Nursing Home: 60 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

GHS COTTAGES AT BRUSHY CREEK 101 COTTAGE CREEK CIR GREER, SC 29650-2438 FAC.#:864-797-8990 HEALY, STANLEY L PH#: 864-455-7000 Facility Email: BETHEREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM NCF-0945 / 10/31/2014	144
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Licensed Beds: Nursing Home: 144 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

GHS GREENVILLE MEMORIAL MEDICAL CENTER-SUBACUTE UNIT 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-6155 TALBERT, ADRIENNE PH#: 864-455-6155 Facility Email: PSAWICKI@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200 GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM NCF-0934 / 02/28/2014	15
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Licensed Beds: Nursing Home: 15 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Division of Health Licensing

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GLORIFIED HEALTH & REHAB OF GREENVILLE 8 N TEXAS AVE GREENVILLE, SC 29611-5034 FAC.#:864-295-1331 BURTON, HEATHER B PH#: 864-295-1331 Facility Email: HEBURTON@COVENANTDOVE.COM	Greenville / Limited Liability 8 N TEXAS AVE GREENVILLE, SC 29611-5034 GLORIFIED HEALTH & REHAB OF GREENVILLE LLC NCF-0903 / 12/31/2013	132

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

HEARTLAND HEALTH CARE CENTER-GREENVILLE EAST 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 FAC.#:864-246-2721 COCHRAN, AMANDA C PH#: 864-246-2721 Facility Email: 4032-ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 OAKMONT EAST-GREENVILLE SC LLC NCF-0952 / 12/31/2014	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

HEARTLAND HEALTH CARE CENTER-GREENVILLE WEST 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 FAC.#:864-246-2721 LOYD, DEREK PH#: 000-000-0000 Facility Email: 4033-ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 OAKMONT WEST-GREENVILLE SC LLC NCF-0953 / 12/31/2014	125
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Licensed Beds: Nursing Home: 125 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

HOPE HEALTH & REHAB OF MARIETTA 2906 GEER HWY MARIETTA, SC 29661-9517 FAC.#:864-836-6381 HAMMETT, WARREN E PH#: 803-245-4321 Facility Email: WHAMMETT@COVENANTDOVE.COM	Greenville / Limited Liability 2906 GEER HWY MARIETTA, SC 29661-9517 HOPE HEALTH & REHAB OF MARIETTA LLC NCF-0920 / 12/31/2013	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Division of Health Licensing

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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LAUREL BAYE HEALTHCARE OF GREENVILLE 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 FAC.#:864-232-2442 NATALE, NICHOLA A PH#: 000-000-0000 Facility Email: NNADKARNI@LAURELBAYE.COM	Greenville / Ltd. Liability 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 LAUREL BAYE HEALTHCARE OF GREENVILLE LLC NCF-0805 / 04/30/2014	132
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Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

LINVILLE COURTS AT THE CASCADES VERDAE 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FAC.#:864-528-5501 JOHNSON, DENA CHANEZ PH#: 864-528-5501 Facility Email: KHUFFSTETLER@SENIOR-LIVING-COMMUNITIES.C	Greenville / Limited Liability 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 CASCADES NURSING LLC NCF-0956 / 04/30/2014	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

MAGNOLIA MANOR-GREENVILLE 411 ANSEL ST GREENVILLE, SC 29601-3499 FAC.#:864-232-5368 PH#: Facility Email: JANE.OWINGS@THICARE.COM	Greenville / Ltd. Liability 411 ANSEL ST GREENVILLE, SC 29601-3499 THI OF SOUTH CAROLINA AT GREENVILLE LLC NCF-0860 / 08/31/2014	99
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Licensed Beds: Nursing Home: 99 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

MAGNOLIA PLACE AT GREENVILLE 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FAC.#:864-288-1415 FARTHING, SHANNON P PH#: 864-288-1415 Facility Email: SHANNON.FARTHING@FUNDLTC.COM	Greenville / Ltd. Liability 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT GREENVILLE LLC NCF-0869 / 08/31/2014	120
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Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
NHC HEALTHCARE GREENVILLE 1305 BOILING SPRINGS RD GREER, SC 29650-4139 FAC.#:864-458-7566 MOORHOUSE, BRYAN M PH#: 864-458-7566 Facility Email: 1PEN@NHCGREENVILLE.COM	Greenville / Ltd. Liability 1305 BOILING SPRINGS RD GREER, SC 29650-4139 NHC HEALTHCARE/GREENVILLE LLC NCF-0807 / 07/31/2014	176

Licensed Beds: Nursing Home: 176 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

NHC HEALTHCARE MAULDIN 850 E BUTLER RD GREENVILLE, SC 29607-5842 FAC.#:864-675-6421 DOBSON, DEBORAH D PH#: 864-675-6421 Facility Email: NHCMAULDIN@NHCMAULDIN.COM	Greenville / Ltd. Liability PO BOX 600 MAULDIN, SC 29662-0600 NHC HEALTHCARE/MAULDIN LLC NCF-0796 / 06/30/2014	180
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Licensed Beds: Nursing Home: 180 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

OMEGA HEALTH & REHAB OF GREENVILLE 809 LAURENS RD GREENVILLE, SC 29607-1914 FAC.#:864-232-8196 MORRISON, SHANNON PH#: 864-878-9620 Facility Email: REVATT@COVENANTDOVE.COM	Greenville / Limited Liability 809 LAURENS RD GREENVILLE, SC 29607-1914 OMEGA HEALTH & REHAB OF GREENVILLE LLC NCF-0912 / 12/31/2013	79
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Licensed Beds: Nursing Home: 79 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

ROLLING GREEN VILLAGE HEALTH CARE FACILITY 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 FAC.#:864-987-9800 HICKMAN, HOPE C PH#: 864-987-9800 Facility Email: HOPEH@ROLLINGGREENVILLAGE.COM	Greenville / Non-Profit Corporation 1 HOKE SMITH BLVD GREENVILLE, SC 29615-5308 ROLLING GREEN VILLAGE NCF-0456 / 10/31/2014	74
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Licensed Beds: Nursing Home: 74 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Nursing Home

Number of Activities/Facilities licensed: 20 Number Licensed Units: 1,937

Division of Health Licensing

County: Greenville

Facility Type: PSAD Inpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
PHOENIX CENTER DETOXIFICATION SERVICES 1400 CLEVELAND ST GREENVILLE, SC 29607-2410 FAC.#:864-467-3770 VINSON, GWEN J PH#: 864-467-3770 Facility Email: GVINSON@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0024 / 05/31/2014	16
Licensed Beds:Medical Detox: 16 Social Detox:	0 Res. Trestment Program: 0	
SERENITY PLACE 6 DUNEAN ST GREENVILLE, SC 29611-6089 FAC.#:864-467-3751 FRYAR, NATALIE PH#: 864-467-3751 Facility Email: NFYAR@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0011 / 05/31/2014	16
Licensed Beds:Medical Detox: 0 Social Detox:	0 Res. Trestment Program: 16	
WHITE HORSE ACADEMY 975 FOOT HILLS RD GREENVILLE, SC 29617-6136 FAC.#:864-371-1280 CAMPBELL, JAMES PH#: 864-331-1279 Facility Email: JACAMPBELL@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0030 / 05/31/2014	16
Licensed Beds:Medical Detox: 0 Social Detox:	0 Res. Trestment Program: 16	

Totals For Facility/License Type: PSAD Inpatient

Number of Activities/Facilities licensed: 3 Number Licensed Units: 48

Division of Health Licensing

County: Greenville

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ADDCARE COUNSELING 721 LOWNDES HILL RD STE C GREENVILLE, SC 29607-2150 FAC.#:864-467-1319 BRADY, ANGELA T PH#: 864-467-1319 Facility Email: ANGELA@ADDCARECOUNSELING.COM	Greenville / Corporation 413 VARDRY ST STE 7 GREENVILLE, SC 29601-3331 ADDCARE COUNSELING INC OTP-0083 / 12/31/2013	1
Certifications:None		
CROSSROADS TREATMENT CENTER OF GREENVILLE 157 BROZZINI CT GREENVILLE, SC 29615-5340 FAC.#:864-288-7636 JOHNSON, DEBORAH M PH#: 864-288-7636 Facility Email: DJOHNSON@CROSSROADSTREATMENTCENTERS.COM	Greenville / Professional Corporation 155 BROZZINI CT STE E GREENVILLE, SC 29615-5340 CROSSROADS TREATMENT CENTER OF GREENVILLE PC OTPN-0077 / 09/30/2014	1
Certifications:Narcotics Treatment Program		
DON FOSTER AND ASSOCIATES 104 MILLS AVE GREENVILLE, SC 29605-4018 FAC.#:864-235-5666 FOSTER, DON K PH#: 864-235-5666 Facility Email: DFAINC@BELLSOUTH.NET	Greenville / Corporation 104 MILLS AVE GREENVILLE, SC 29605-4018 DON FOSTER AND ASSOCIATES INC OTP-0051 / 03/31/2014	3
Certifications:None		
DRUG COURT TREATMENT GROUP 305 E NORTH ST STE 320 GREENVILLE, SC 29601-2113 FAC.#:864-467-8277 EDWARDS, PATRICIA PH#: 864-467-8277 Facility Email: JSTEADMAN@GRENVILLECOUNTY.ORG	Greenville / State 305 E NORTH ST STE 320 GREENVILLE, SC 29601-2113 13TH CIRCUIT SOLICITORS OFFICE OTP-0001 / 06/30/2014	2
Certifications:None		
GREENVILLE COUNTY DETENTION CENTER (OTP) 20 MCGEE ST, DETENTION CENTER GREENVILLE, SC 29601-2299 FAC.#:864-467-2384 LIVINGSTON, MARIE PH#: 864-467-2384 Facility Email: Not on File	Greenville / County 20 MCGEE ST, DETENTION CENTER GREENVILLE, SC 29601-2299 GREENVILLE COUNTY COUNCIL OTP-0089 / 08/31/2014	1
Certifications:None		
GREENVILLE METRO TREATMENT CENTER 602 AIRPORT RD STE C GREENVILLE, SC 29607-2617 FAC.#:864-234-7952 DAVENPORT, DERRICK PH#: 864-234-7952 Facility Email: AROULHAC@CMGLP.COM	Greenville / Limited Liability Limited Partnership 8529 SOUTHPARK CIR STE 270 ORLANDO, FL 32819-9017 METRO TREATMENT OF SOUTH CAROLINA LP OTPN-0091 / 02/28/2014	1
Certifications:Narcotics Treatment Program, Methodone Treatment Program		

County: Greenville

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
PAVILLON-GREENVILLE OUTPATIENT SERVICES 117 PELHAM COMMONS BLVD GREENVILLE, SC 29615-4974 FAC.#:864-241-6688 VANCE, ANNE E PH#: 864-241-6688 Facility Email: GREENVILLLEINFO@PAVILLON.ORG	Greenville / Non-Profit Corporation 115 PAVILLION PL MILL SPRING, NC 28756-5809 PAVILLON INTERNATIONAL OTP-0102 / 11/30/2014	1

Certifications:None

PHOENIX CENTER OUTPATIENT SERVICES 1400 CLEVELAND ST GREENVILLE, SC 29607-2410 FAC.#:864-467-3790 MCLAIN, MICHAEL PH#: 864-467-3790 Facility Email: MMCLAIN@PHOENIXCENTER.ORG	Greenville / County PO BOX 1948 GREENVILLE, SC 29602-1948 GREENVILLE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE OTP-0071 / 05/31/2014	1
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Certifications:None

Totals For Facility/License Type: PSAD Outpatient
 Number of Activities/Facilities licensed: 8 Number Licensed Units: 11

Division of Health Licensing

County: Greenville

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
DSI GREENVILLE DIALYSIS 1004 GROVE RD GREENVILLE, SC 29605 FAC.#:864-242-4320 CASEY RN, JACQUELINE D PH#: 864-242-0802 Facility Email: JCASEY@DSI-CORP.COM	Greenville / Corporation 424 CHURCH ST STE 1900 NASHVILLE, TN 37219-2387 DIALYSIS NEWCO INC ERD-0169 / 09/30/2014	37
Licensed Stations: Hemodialysis: 37 Peritoneal: 0		
DSI HOME DIALYSIS PLEASANTBURG 110 CHALMERS RD STE D GREENVILLE, SC 29605-1351 FAC.#:864-558-2375 SFEIR RN, MARSHA A PH#: Facility Email: SKOPTA@DSI-CORP.COM	Greenville / Limited Liability 424 CHURCH ST STE 1900 NASHVILLE, TN 37219-2387 DSI GREENVILLE LLC ERD-0194 / 09/30/2014	3
Licensed Stations: Hemodialysis: 0 Peritoneal: 3		
DSI PLEASANTBURG DIALYSIS 110 CHALMERS RD STE C GREENVILLE, SC 29605-1351 FAC.#:864-558-2365 PEPPER RN, SELMA PH#: 864-963-7275 Facility Email: SKOPTA@DSI-CORP.COM	Greenville / Corporation 424 CHURCH ST STE 1900 NASHVILLE, TN 37219-2387 DIALYSIS NEWCO INC ERD-0168 / 09/30/2014	16
Licensed Stations: Hemodialysis: 16 Peritoneal: 0		
DSI POWDERHORN DIALYSIS 16 POWDERHORN RD SIMPSONVILLE, SC 29681-3399 FAC.#:864-962-2222 BLACKWELL, TAMARALYN K PH#: 864-962-2222 Facility Email: SKOPTA@DSI-CORP.COM	Greenville / Corporation 424 CHURCH ST STE 1900 NASHVILLE, TN 37219-2387 DIALYSIS NEWCO INC ERD-0127 / 09/30/2014	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 0		
GREENVILLE DIALYSIS CLINIC 220 HOWE ST STE 220A GREENVILLE, SC 29601-3524 FAC.#:864-271-2002 HEGGIE RN, DIANNE MORAN PH#: 000-000-0000 Facility Email: Not on File	Greenville / Limited Liability 220 HOWE ST STE 220A GREENVILLE, SC 29601-3524 GREENVILLE DIALYSIS CLINIC LLC ERD-0201 / 07/31/2014	22
Licensed Stations: Hemodialysis: 20 Peritoneal: 2		
GREENVILLE WEST END DIALYSIS 297 PETE HOLLIS BLVD GREENVILLE, SC 29601-1143 FAC.#:864-233-9866 COOLEY, LINDA PH#: Facility Email: Not on File	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0128 / 04/30/2014	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 0		

County: Greenville

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GREER KIDNEY CENTER 211 VILLAGE DR GREER, SC 29651-1238 FAC.#:864-877-8005 BROCK, VIRGINIA G PH#: 864-233-9866 Facility Email: Not on File	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0027 / 12/31/2014	28
Licensed Stations: Hemodialysis: 28 Peritoneal: 0		
GREER SOUTH DIALYSIS 3254 BRUSHY CREEK RD GREER, SC 29650-1000 FAC.#:864-801-2065 WILLIAMS RN, MARY BARBARA PH#: 000-000-0000 Facility Email: Not on File	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0162 / 04/30/2014	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 0		
GREER SOUTH HOME TRAINING 3254 BRUSHY CREEK RD STE A GREER, SC 29650-1000 FAC.#:864-877-9157 REYNOLDS RN, SUSAN D PH#: 000-000-0000 Facility Email: Not on File	Greenville / Limited Liability Company (single member) 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 LONGWORTH DIALYSIS LLC ERD-0202 / 08/31/2014	3
Licensed Stations: Hemodialysis: 0 Peritoneal: 3		
UPSTATE DIALYSIS CENTER 308 MILLS AVE GREENVILLE, SC 29605-4022 FAC.#:864-271-3700 DONOVAN, KEVIN ANDREW PH#: 000-000-0000 Facility Email: Not on File	Greenville / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0098 / 09/30/2014	34
Licensed Stations: Hemodialysis: 30 Peritoneal: 4		

Totals For Facility/License Type: Renal Dialysis

Number of Activities/Facilities licensed: 10 Number Licensed Units: 206

Division of Health Licensing

County: Greenville

Facility Type: Residential Treatment for Children & Adolescents

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
EXCALIBUR YOUTH SERVICES 3683 S INDUSTRIAL DR SIMPSONVILLE, SC 29681-3238 FAC.#:864-836-7220 SHORT, JOHN M PH#: 864-836-7220 Facility Email: MSHORT@RECOVEROURYOUTH.ORG	Greenville / Limited Liability PO BOX 968 TRAVELERS REST, SC 29690-0968 EXCALIBUR YOUTH SERVICES LLC RTF-0022 / 12/31/2014	60
GENERATIONS RESIDENTIAL PROGRAMS 841 DUNKLIN BRIDGE RD FOUNTAIN INN, SC 29644 FAC.#:864-243-5557 REYNOLDS, KATHLEEN PH#: 864-248-5557 Facility Email: KATHLEEN@GENERATIONSGROUP.COM	Greenville / Non-Profit Corporation PO BOX 80009 SIMPSONVILLE, SC 29680-0001 GENERATIONS RESIDENTIAL PROGRAMS INC RTF-0027 / 08/31/2014	30
GHS MARSHALL I PICKENS HOSPITAL CHILDREN'S PROGRAM 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-7807 ELLISON, REBECCA PH#: 864-455-7807 Facility Email: BETHREDGE@GHS.ORG	Greenville / District 300 E MCBEE AVE STE 200, SUN TRUST BLDG GREENVILLE, SC 29601-2898 GREENVILLE HEALTH SYSTEM RTF-0007 / 03/31/2014	22
SPRINGBROOK BEHAVIORAL HEALTH SYSTEM RTF 1 HAVENWOOD LN TRAVELERS REST, SC 29690-9447 FAC.#:864-834-8013 ROWLEY, MICHAEL PH#: 864-834-8013 Facility Email: LISA.MCJUNKIN@SPRINGBROOKBHS.COM	Greenville / Corporation PO BOX 1005 TRAVELERS REST, SC 29690-1005 CHESTNUT HILL MENTAL HEALTH CENTER INC RTF-0001 / 08/31/2014	68

Totals For Facility/License Type: Residential Treatment for Children & AdolescentsNumber of Activities/Facilities licensed: 4 Number Licensed Units: 180

Division of Health Licensing

County: Greenville

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ARTISTIC INK II 1178 WOODRUFF RD STE 7 GREENVILLE, SC 29607-4126 FAC.#:706-498-5811 ROWLAND, TERRY T PH#: 706-498-5811 Facility Email: TERRYROWLAND777@GMAIL.COM	Greenville / Sole Proprietorship PO BOX 62 SANDY SPRINGS, SC 29677-0062 ROWLAND, TERRY T TF-0145 / 10/31/2014	5
MAIN STREET STUDIO 303 N MAIN ST STE B MAULDIN, SC 29662-2303 FAC.#:361-816-3069 BURRISS, TIMOTHY JASON PH#: 361-816-3069 Facility Email: MAINSTREETSTUDIOSC@YAHOO.COM	Greenville / Sole Proprietorship 303 N MAIN ST STE B MAULDIN, SC 29662-2303 BURRISS, TIMOTHY JASON TF-0156 / 05/31/2014	4
PHYSICAL GRAFFITI SOUTH 477 HAYWOOD RD STE G, REGENCY SQUARE GREENVILLE, SC 29607-4360 FAC.#:864-991-8564 FALKOFF, CHARLES PH#: 864-525-8759 Facility Email: FALKOFFCHUCK69@GMAIL.COM	Greenville / Limited Liability 477 HAYWOOD RD STE G, REGENCY SQUARE GREENVILLE, SC 29607-4360 PHYSICAL GRAFFITI SOUTH LLC TF-0045 / 08/31/2014	4

Totals For Facility/License Type: Tattoo FacilityNumber of Activities/Facilities licensed: 3 Number Licensed Units: 13

Number of Activities/Facilities licensed in county of Greenville # Lics: 137
 Number Licensed Units : 6,506

Report Totals:

Total Number of Activities/Facilities licensed 137 Total Number Licensed Units: 6,506